

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION (37 CFR 1.63) FOR
UTILITY OR DESIGN APPLICATION
USING AN APPLICATION DATA SHEET
(37 CFR 1.76)**

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Michael Brown
Group Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	22013-04957

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☒ The attached application, or
☐ Application No. _____, filed on _____,
☐ as amended on _____ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/our knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR(S)

Inventor one: Michael Brown Citizen of: USA

Signature: Michael A. Brown Date: 4/30/2001

Inventor two: _____ Citizen of: _____

Signature: _____ Date: _____

Inventor three: _____ Citizen of: _____

Signature: _____ Date: _____

Inventor four: _____ Citizen of: _____

Signature: _____ Date: _____

☐ Additional inventors are being named on _____ additional form(s) attached hereto.

Please type a plus sign (+) inside this box →

+

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

To Be Assigned

Filing Date

Herewith

First Named Inventor

Michael Brown

Title

Method and System for Route
Table Minimization

Group Art Unit

To Be Assigned

Examiner Name

To Be Assigned

Attorney Docket Number

22013-04957

I hereby appoint:



Practitioners at Customer Number

00758



OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:



The above-mentioned Customer Number.

I am the:



Applicant/Inventor **OR**



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Michael Brown

Signature

Michael A. Brown

Date

April 30, 2001

I am the:



Applicant/Inventor **OR**



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.